

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
 DES MOINES, IA 50319
 Fax: (515)281-4073
 www.iowa.gov/ethics

FORM-GBG

Gift, Bequest, or Grant information
 received by a department or
 accepted by the Governor on behalf
 of the state

For office use only

Indexed _____
 Audited _____
 Checked _____
 Computer _____

Iowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

Office of Energy Independence

Name of Department or Office

321 East 12th Street

Des Moines, IA 50319

Mailing Address

City, State, Zip Code

515-281-0187

Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Sherry James

Name

Mailing Address (if different from above)

City, State, Zip (if different from above)

Email Address

Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Drake University

Name

2621 Carpenter Avenue

Des Moines, IA 50311

Mailing Address

City, State, Zip Code

515-271-2824

Area Code & Telephone Number

Email Address (optional)

November 1, 2007

Coffee Mug

\$ 3.00

Coaster

\$ 4.00

Date of Gift, Bequest, or Grant

Amount/Value*

*value is defined as "fair market value" of item as determined by
 receiving department or office. If no value mark "0.00".

Provide a description of the gift, bequest, or grant and purpose thereof:

Blue coffee mug with painted "Drake University Law School"

Metal Coaster with "Drake University Law School" inscribed.

These items were given as thank-you gifts for the Office Director giving a presentation. The items will be kept in the office cupboard and used for guests.

Criteria to use this form:

Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Jennifer Wright, affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature

Date

11.20.07

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DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

| | |
|----------------------------------|-----------------------|
| Office of Energy Independence | |
| Name of Department or Office | |
| 321 East 12 th Street | Des Moines, IA 50319 |
| Mailing Address | City, State, Zip Code |
| 515-281-0187 | |
| Area Code & Telephone No. | |

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

| | |
|---|--|
| Sherry James | |
| Name | |
| Mailing Address (if different from above) | City, State, Zip (if different from above) |
| Email Address | Area Code & Telephone Number (if different from above) |

DONOR OF GIFT, BEQUEST, OR GRANT:

| | |
|--------------------------------------|------------------------|
| Federal Home Loan Bank of Des Moines | |
| Name | |
| 9007 Walnut Street | Des Moines, Iowa 50309 |
| Mailing Address | City, State, Zip Code |
| 515-281-1000 | |
| Area Code & Telephone Number | |
| Email Address (optional) | |

| | |
|--|---------------|
| November 7, 2007 | |
| Small Desk Clock | \$8.00 |
| Date of Gift, Bequest, or Grant | Amount/Value* |
| *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00". | |

Provide a description of the gift, bequest, or grant and purpose thereof:

Very small desk clock with Roman Numerals.

This item was given as a thank-you gift for the Office Director giving a presentation. The item will be kept in the office.

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Date

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